

Examiners will evaluate treatment objectives and results, in addition to doing a Records Analysis and Overall Analysis.

MEASUREMENTS

SKELETAL ANALYSIS (S)

0-Acceptable 1-Unacceptable

SCORING

CEPHALOMETRIC

	PRE TX A	PROG A1	POST TX B	DIFF. A-B
SNA°				
SNB°				
ANB°				
SN-MP°**				
FMA°				

EXAMINEE TX OBJECTIVES		PRE TX OBJ	POST TX RESULT	Score
A-P MX		<input type="radio"/> 0 <input type="radio"/> 1	<input type="radio"/> 0 <input type="radio"/> 1	
A-P MN		<input type="radio"/> 0 <input type="radio"/> 1	<input type="radio"/> 0 <input type="radio"/> 1	
VERT MX		<input type="radio"/> 0 <input type="radio"/> 1	<input type="radio"/> 0 <input type="radio"/> 1	
VERT MN		<input type="radio"/> 0 <input type="radio"/> 1	<input type="radio"/> 0 <input type="radio"/> 1	

DENTAL ANALYSIS (D)

1 TO NA mm				
1 TO SN°				
- 1 TO NB mm				
- 1 TO MP°				

A-P MX		<input type="radio"/> 0 <input type="radio"/> 1	<input type="radio"/> 0 <input type="radio"/> 1	
A-P MN		<input type="radio"/> 0 <input type="radio"/> 1	<input type="radio"/> 0 <input type="radio"/> 1	
VERT		<input type="radio"/> 0 <input type="radio"/> 1	<input type="radio"/> 0 <input type="radio"/> 1	

ARCH

6 TO 6 WIDTH				
- 6 TO 6 WIDTH				
- 3 TO 3 WIDTH				
CURVE OF SPEE				
MANDIBULAR ARCH FORM				

TRANS MX		<input type="radio"/> 0 <input type="radio"/> 1	<input type="radio"/> 0 <input type="radio"/> 1	
TRANS MN		<input type="radio"/> 0 <input type="radio"/> 1	<input type="radio"/> 0 <input type="radio"/> 1	
TRANS ANT		<input type="radio"/> 0 <input type="radio"/> 1	<input type="radio"/> 0 <input type="radio"/> 1	
CURVE OF SPEE		<input type="radio"/> 0 <input type="radio"/> 1	<input type="radio"/> 0 <input type="radio"/> 1	
ARCH FORM MN		<input type="radio"/> 0 <input type="radio"/> 1	<input type="radio"/> 0 <input type="radio"/> 1	

FACIAL ANALYSIS (F)

E-LINE	Upper			
	Lower			

FACIAL ESTHETICS		<input type="radio"/> 0 <input type="radio"/> 1	<input type="radio"/> 0 <input type="radio"/> 1	
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S-D-F Subtotal

RECORDS ANALYSIS

Shaded areas for examiner only.

	FACIAL PHOTOS	INTRAORAL PHOTOS	INTRAORAL RADIOGRAPHS	PERIO RECORD	CEPH. & TRACINGS	COMP. TRACING	DENTAL CASTS	CASE REPORT	PRESENT QUALITY	
PRE-TX A S/OR PROG. A1	0 1	0 1	0 1	0 1	0 1		0 1			
FINAL B	0 1	0 1	0 1	0 1	0 1	0 1	0 1	0 1	0 1	SUB-TOTAL RECORDS ANALYSIS

OVERALL ANALYSIS

TREATMENT PLANNING / MECHANOTHERAPY				FINAL TREATMENT RESULTS				
0	1	2	3	0	1	2	3	
ACCEPT	DEFICIENCIES			ACCEPT	DEFICIENCIES			SUB-TOTAL OVERALL ANALYSIS

TOTAL